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APPLICANTS

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** CONTINUING DATA *****

This application is a DIV of 10/242,060 09/12/2002 *yes mn*

** FOREIGN APPLICATIONS *****

*None mn*IF REQUIRED, FOREIGN FILING LICENSE
GRANTED

** 03/31/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	IL	7	9	12
Examiner's Signature <i>[Signature]</i>	Initials <i>mn</i>			

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TITLE

METHOD FOR CONNECTING A COAXIAL CABLE

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
RECEIVED 1070		<input type="checkbox"/> 1.16 Fees (Filing)
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